Department of Public Safe		AY PATRON	MATTON	CIDADAADX		.i		
DPS-90-C (Rev. 04/03)	CRIMIN	AL INFOR	CIVIATION	SUMMARY	LI ADI	DITION	AL PAGES	
TROOP/UNIT: A-New Fairfield	RTO OTE	ER INVOLVE	D AGENCY:	NO YES,				
,	INVESTIGATING TROOPER / OFFICER:			DPS CASE NUMBER:				
	Trooper Valentin #483			DPS04027917				
LOCATION OF INCIDENT (STREET NAM		WN ONLY):						
8 Bigelow Road New Fairfiel								
SUMMARY OF INCIDENT OR AFFIDAVIT	-	ARREST MA		ER INVESTIGATION				
The victim returned home ar	d found a	suspicious	item in h	er driveway.				
THE ITEM WAS REMOVED AN	D WILL BI	E ANALYZED	180 175 C	WIBUTS. UNDE	e mure	2116 A	110~1.	
-			*	17 1		-	6	
VICTIM: (DO NOT IDENTIFY ANY JUVENI					ELD & A	GE" IN D	OB FIELD)	
NAME / BUSINESS / ACENCY: ME T		ADDRESS: (TOWN/CITY&STATE ONLY)				ILE:	INJURED:	
Roy, Alicia		8 Bigelow Road New Fairf		ield CT		CE: DY		
		0			JUVEN		INJURED:	
13	L L ADD	ADDRESS: (TOWN/CITY&STATE ONLY)					- YES	
1					ACE		DNO	
NAME / BUSINESS / AGENCY:	DF ADD	RESS: (TOWN/CIT	Y&STATE ONLY		JUVEN		INJURED:	
	[	,			יום		□ YES	
					AGE			
ARRESTED: (DO NOT IDENTIFY ANY JUV	M D F	DOB:	ADDRESS:	E "JUVENILE" IN THE NAME	E FIELD-A	-AGE- L	V DOB FIELD)	
NAME:			ADDRESS.	147				
CHARGES:	COURT:		BOND:		i	INJURE	n:	
CHARGES:	GA:		☐ CASE	☐ CASE ☐ SURETY		YES NO		
2.	J.		☐ NON-SURE	TY WPTA		AMBUL	ANCE:	
1.	TOWN:		AMOUNT 5:	mulenn i e corme		HOSPIT		
				SENTED AT COURT DEPT OF CORRECTION	1000000			
4.	DATE:		L Mount					
NAME:	DM DF	DOB:	ADDRESS:					
CEARGES:	COURT:	-	BOND:	F		INJURE	ED:	
1.	GA:		CASH SURETY WPTA		- 1	YES NO		
2.		- 1434		AMOUNT S:		☐ YES. ☐ NO		
3.	TOWN:	OWN:		BE PRESENTED AT COURT			HOSPITAL:	
4.	DATE:		☐ TRANSTO	DEPT OF CORRECTION	√S @:			
	DM DF	DOB:	ADDRESS:					
NAME:	шм шв	DOB:	ADDRESS:					
	·I corm		BOND:	-		INJURI	ED:	
CHARGES:				CASE SURETY Y			S I NO	
2.	OA.		NON-SURETY WPTA			AMBULANCE:		
1	TOWN:	. ".	AMOUNT 5:		.	HOSPE		
3.				ESENTED AT COURT DEPT OF CORRECTION	vs. I			
4.	DATE:	-	L IRANS TO	DETI OF CORRECTION				
NAME:	OM OF	DOB: ·	ADDRESS:					
N (2 8 12		-	-					
CHARGES:	COURT:		BOND:			INJUR	ED:	
1.	GA:		CASE .	SURETY	1		S NO	
2.			☐ NON-SURI	ETY WPTA			S D NO	
3.	TOWN:		AMOUNT 5:	ESENTED AT COURT		HOSPI		
Jan.			TRANS TO	DEPT OF CORRECTION	NS @:			

SUPERVISOR'S APPROVAL REQUIRED: INITIALS: ID #: DATE:

THIS INTORNATION IS BEING RELEASED TO THE POBLIC IN CONDITIONAL WITH THE FREEDOM OF INFORMATION LAPS.

FOR ADDITIONAL REPORMATION ON MAJOR CRIMES OR ARRESTS, CONTACT THE CONNECTICUT STATE FOLICE FUBLIC INFORMATION OFFICE.

PHONE: 860-685-8230 FAX: 860-685-8201 TO BE